



PATIENT REFUSAL OF CARE GUIDELINES - ADULT

PURPOSE

To provide guidance for EMS Personnel whose advice to an individual for treatment and/or transport is being refused

AUTHORITY

Health and Safety Code, Section 1797.220

PRINCIPLE

Recognizing that the decision to be transported by a provider agency is solely the responsibility of the individual, a process should be in place to document such "refusal of services", to protect both the individual and EMS personnel. An AMA should be initiated whenever the highest medical authority on scene determines that a person would benefit from assessment, treatment and/or transport and that person refuses.

DEFINITIONS

AMA: A term used to designate "against medical advice".

Consent: Consent is defined as the agreement and acceptance as to opinion or course of action.

Emergency: The American Ambulance Association (AAA) defines an "emergency" as "unforeseen condition of a pathophysiological nature, which a prudent layperson, possessing an average knowledge of health and medicine, would judge to require urgent and unscheduled medical attention."

CONSENT

1. Legal consent procedures should not delay immediately required treatment.
2. An individual has the responsibility to consent to or refuse treatment. If he/she is unable to do so consent is then considered implied.
3. In non-emergency cases, consent should be obtained from the individual.

4. For treatment of minors or a definition of emancipated minors refer to Protocol Reference #9080 Care of Minors in the Field.

MENTAL COMPETENCE

1. An individual is mentally competent if he or she:
 - a. Is capable of understanding the nature and consequences of the proposed treatment.
 - b. Has sufficient emotional control, judgment and discretion to manage his or her own affairs.
2. An individual having an understanding of what may happen if treated or not treated, and is oriented to person, place, time and purpose.
3. An individual with an altered level of consciousness will be unlikely to fulfill these criteria.
4. If the individual is not deemed mentally competent, the person should be treated and transported. It is preferable under such circumstances to obtain concurrence of a police officer in this course of action.

REFUSAL OF CARE DOCUMENTATION

In accordance with these guidelines, the following should be carefully documented on the patient care record:

1. The individual's chief complaint, mechanism of injury, level of orientation/level of consciousness.
2. Base Station Contact per Protocol Reference #5040, Radio Communication.
3. Any medical treatment or evaluation needed and refused.
4. The need for emergency transportation; also if transport by means other than an ambulance could be hazardous due to the individual's injury or illness.
5. Individual advised that potential harm could result without emergency medical treatment and/or transport.
6. Individual provided with a refusal advice sheet, and if he or she would accept the refusal advice sheet.

7. A copy of the patient care record with the individual's signature of refusal will be kept by the EMS provider agency per Protocol Reference #2010, Requirements for Patient Care Records.